POSIT...	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	_(signature)_		12/21
FORMALITY REVIEW	JM	JC.86M	3/23/01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected	N	....	Non-elected
=	.... Allowed	I	....	Interference
—	(Through numeral)... Canceled	A	....	Appeal
÷	.... Restricted	O	....	Objected

Claim (Final / Original)	Date	Claim (Final / Original)	Date	Claim (Final / Original)	Date
1 ✔	c3 16 04	51		101	
2		52		102	
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35		85		135	
36 ✔		86		136	
37		87		137	
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42		92		142	
43		93		143	
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45		95		145	
46		96		146	
47		97		147	
48		98		148	
49		99		149	
50		100		150	

If more than 150 claims or 10 actions
staple additional sheet here

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